



## REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to: Mail Stop RCE Commissioner for Patents P.O. 1450 Alexandria, VA 22313-1450

Application No.	09/660,531
Filing Date	September 13, 2000
First Named Inventor	Timothy W. Genske
Art Unit	2145
Examiner Name	A. Q. Choudhury
Attorney Docket Number	6783P005

Reque	est fo	or Cor	ntinue	d Exam	Continumination (Replication.	ied Exami CE) practice	ination (Reunder 37 CF	CE) u R § 1.1	inde 114 de	r 37 C bes not	FR 1.1 apply to a	14 o	of the above-identified application.  tility or plant application filed prior to June	
	<ol> <li>Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).</li> <li>a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.</li> </ol>													
		i. II.	_	Consi Other		nendment(s	s)/reply unde	er 37 (	C.F.R	ł. § 1.1	16 previ	ously	y filed on	
	b.	i. ii.			ndment/Re avit(s)/Dec	eply claration(s)		iii.		Inforn	nation Di	isclos	sure Statement (IDS)	
2.	Mi	iscel												
	a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)													
	b.		Oth	er										
	The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 02-2666. I have enclosed a duplicate copy of this sheet.  i. RCE fee required under 37 CFR 1.17(e) and any additional claims fee(s)  ii. Extension of time fee (37 CFR 1.136 and 1.17)  iii. Other: (\$.00)  b. Check in the amount of \$790.00 enclosed  c. Payment by credit card (Form PTO-2038 enclosd)  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.													
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Name (Print/Type) Judith A. Sze Signature						zepesi	)				<i>Registra</i> Date	atien 91	8/29/2666	<del>0531</del>
				7		CERT	TIFICATE O	F MA	ILING	OR	RANSM	IISSI	ION	
l hereb first cla	y ce ass r	ertify ti mail in	hat th an e	is corre nvelop	spondence e addresse	e is being dep d to: Mail Sto	posited with the position of t	he Unit imissio	ted St ner fo	ates Po or Pater	estal Servi	ice or 3ox 14	on the date shown below with sufficient postage a 1450, Alexandria, VA 22313-1450. August 21, 2006	ıS
Name	e (/	Print/	Туре)		di	DUTH	SZEBE	<u>=</u> < 1						
Signa	ature	е				/ —	$\sim$				Date		August 21, 2006	

Signature